FORM D

PROCESSED

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THOMSON

UNITED STATES SECURITIES AND EXCHANGE **₹**OXIM**ESSION** Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURIT PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number: 3235-0076

Expires: April 30, 2008 Estimated average burden

hours per response 16.00



Name of Offering (check if this is an amendment and name has ch	anged, and indicate change.)	
Commonwealth Tower, L.L.C.		, .
Filing Under (Check box(es) that apply): Rule 504 Rule 505	Rule 506 Section 4(6) ULOE	
Type of Filing: New Filing Amendment		
A. BASIC IDEN	VTIFICATION DATA	
1. Enter the information requested about the issuer		
Name of Issuer (check if this is an amendment and name has chan	ged, and indicate change.)	
Commonwealth Tower, L.L.C.		
Address of Executive Offices (Number and Street, City,	State, Zip Code) Telephone Number (Including Area Code)	
c/o Tishman Speyer U.S. Value-Added Associates VI, L.L.C.,	(212) 715-0300	
45 Rockefeller Plaza, 7th Floor, New York, New York 10111		
Address of Principal Business Operations (Number and Street, City,	State, Zip Code) Telephone Number (Including Area Code)	
(if different from Executive Offices)		
Brief Description of Business: To acquire, develop or redevelop one	ore more office buildings located in the Washington, DC area)
	·	•
Type of Business Organization		л.
corporation limited partnership, already		specify):
☐ business trust ☐ limited partnership, to be for	ormed limited liability c	сотралу
Month	Year	
1 1	0 6 🖾 Actual 🗀 Estimated	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Po	stal Service abbreviation for State:	
CN for Canada; FN for	other foreign jurisdiction) D E	
·		

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230,501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

=			A. BASIC IDE	NTIFICATION DATA			1
2. Ente	er the information r	equested for the f	ollowing:	-			
•	Each promoter of	the issuer, if the i	ssuer has been organized	within the past five years	•		
•	Each beneficial ov of the issuer;	wner having the p	ower to vote or dispose, o	or direct the vote or dispos	sition of, 10% or	more of a class of equity sec	uritie
• .	Each executive of	ficer and director	of corporate issuers and	of corporate general and n	nanaging partner	s of partnership issuers; and	
•	Each general and	managing partner	of partnership issuers.				
Check I	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	Managing Member	
Full Na	me (Last name first	, if individual)					
		•	ortfolio Guarantor I, L.I	L.C.	•		
Busines	s or Residence Add	lress (Number a	nd Street, City, State, Zip	Code)			
c/o Tish	ıman Speyer U.S. V	/alue-Added Ass	ociates VI, L.L.C., 45 Ro	ckefeller Plaza, 7th Floor	r, New York, Ne	ew York 10111	•
Check E	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General Partner	-
ı	me (Last name first Jerry I.	, if individual)		1 (-) 2 (1 (1 (1 (1 (1 (1 (1 (1 (1 (
1	The Country of the Co	- Training Company of the contract of the cont	nd Street, City, State, Zip ociates VI, L.L.C., 45 Ro	Code) ckefeller Plaza, 7th Floor	r, New York, Ne	w York 10111	
Check E	Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	General Partner	.
	me (Last name first Robert J.	, if individual)		en de la companya de			9
Busines	s or Residence Add		nd Street, City, State, Zip ociates VI, L.L.C., 45 Ro	Code) ckefeller Plaza, 7th Flooi	r, New York, Ne	w York 10111	

Executive Officer

□ Director

☐ Partner

☐ Beneficial Owner

c/o Tishman Speyer U.S. Value-Added Associates VI, L.L.C., 45 Rockefeller Plaza, 7th Floor, New York, New York 10111

Check Box(es) that Apply: Promoter

Business or Residence Address (Number and Street, City, State, Zip Code)

Full Name (Last name first, if individual)

Galiano, Paul A.

17 1.2				B. II	NFORMAT	TION ABO	UT OFFER	RING				
•									-		Yes	No
1. Has the	issuer sold	, or does th					tors in this c					⊠ `
			Answ	er also in A	Appendix, C	olumn 2, i	filing under	ULOE.				
2. What is	the minim	um investm	ent that will	l be accepte	d from any	individual	?:			· ·	\$1,000	<u>)</u> .
•								•			_	-
											Yes	No
3. Does th	e offering p	ermit joint	ownership	of a single u	unit?	······					\boxtimes	
4 Enter t	he informat	ion remes	ted for eacl	h nerson w	ho has bee	n or will	be paid or g	iven dire	ctiv or ind	irectly, any	. •	
							ction with sa					
							registered wi					
			oker or deal forth the inf				to be listed	are associ	ated person	is of such a		
	(Last name			·	n mai bioke	or dealer	omy.	•			•	
i un riante	(Lust name	11130, 11 1110	i, vicua)			•				,		
			•	<u> </u>								
Business o	r Residence	Address (I	Number and	Street, City	y, State, Zip	Code)			_			
Name of A	ssociated B	roker or De	ealer			<u> </u>						
	uities, LLC		July 1	•					•	-		•
					•							•
			s Solicited		o Solicit Pu	rchasers						—
			dividual Star	-					***************************************			. All States
(AL)	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	[DC]	X[FL]	.X [GA]	[HI]	[ID]
[IL] [MT]	(IN)	[IA]	[KS] [NH]	[KY]	[LA]	(ME)	X [MD]	[MA]		[MN] X [OK]	[MS]	[MO]
[RI]	[NE] [SC]	[NV] [SD]	X (TN)	[NJ] X [TX] [*]	(NM) [UT]	[NY] [VT]	[NC] X [VA]	[ND] [WA]	(OH) (WV)	[WI]	[OR] [WY]	X [PA] [PR]
				- (,			22 ()	[,,,,,]				()
Full Name	(Last name	first, if ind	lividual)									
				•								
Business o	r Residence	Address (I	Number and	Street, City	, State, Zip	Code)						
	•				-			. •				
N C A			1	<u></u> -				<u>. •</u>	· <u> </u>	·		· ·
Name of A	ssociated B	roker or De	ealer									
							•					•
States in W	hich Person	n Listed Ha	s Solicited	or Intends to	Solicit Pu	rchasers	-		-			
(Check "A	All States" o	or check inc	dividual Stat	es)	•••••			• • • • • • • • • • • • • • • • • • • •				All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
(IL):	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[M1]	[MN]	[MS]	[MO]
. [MT]	[NE]	(NV)	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	(SC)	[ŞD] .	[TN]	[TX]	[UT] -	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	ividual)									-
•												
Business of	r Residence	Address (1	Number and	Street City	State 7in	Code)						
Dasiness o	i Acsidence	71001035 (1	, annoer une	bucci, chi	, otate, zip	Code						
			•	•	. '		٠.					
Name of A	ssociated B	roker or De	ealer			•		,		•	•	
,			-						•			
States in W	hich Persor	1 Listed Ha	s Solicited o	r Intends to	Solicit Pu	rchasers						<u> </u>
										***********		☐ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	(WV)	[WI]	[WY]	(PR)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					•
	Type of Security		ggregate ering Pric	e	Amount Al Sold	
	Debt	. \$			<u>\$</u>	
	Equity				<u>-</u> \$	
	Common Preferred	<u>v</u>			<u>v</u>	
	Convertible Securities (including warrants)	. <u>\$</u>			<u>\$</u>	
	Partnership Interests	\$			<u>\$</u>	
	Other (Specify Class A Preferred Units)	\$176,50)		\$176,500	
	Total		_	. •	\$176,500	
	Answer also in Appendix, Column 3, if filing under ULOE.	<u> </u>	<u>e</u>			•
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					
]	Number		Aggreg Dollar An	-
		I	nvestors		of Purch	ases
	Accredited Investors	<u>123</u>			<u>\$176,500</u>	
	Non-accredited Investors					
	Total (for filings under Rule 504 only)		_			
	Answer also in Appendix, Column 4, if filing under ULOE.	·	_			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.					
	Type of offering		Type of Security		Dollar An Sold	
	Rule 505		_			
	Regulation A	·	_			
	Rule 504		_ ,			
	Total		_			
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		-	,		
	Transfer Agent's Fees				<u>\$</u>	·
	Printing and Engraving Costs				<u>\$</u>	
	Legal Fees				<u> </u>	
	Accounting Fees				<u>\$</u>	
	Engineering Fees	•			. <u>*</u> \$_	
	Administration Fee			⊠	\$24,37 <u>5</u>	
	Other Expenses (identify) legal and accounting expense			☒	\$107.000 "	
	Total			⊠		
	1014				<u>\$45,125</u>	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

 Enter the difference between the aggrand total expenses furnished in response to proceeds to the issuer." 	Part C - Question 4.a. This difference	e is the "adjusted	gross			<u>\$45,125</u>
5. Indicate below the amount of the adjusted gr the purposes shown. If the amount for any p left of the estimate. The total of the paymer forth in response to Part C - Question 4.b abo	oss proceeds to the issuer used or proposurpose is not known, furnish an estimate its listed must equal the adjusted gross	sed to be used for a	each of		•	:
			٠	Payments to Officers, Directors, & Affiliates	•	Payments Others
Salaries and fees	***************************************		□ <u>\$</u>		\Box	
Purchase of real estate and interests in	real estate		□ <u>\$</u>		. 🛛	\$45,12 <u>5</u>
Purchase, rental or leasing and installar	tion of machinery and equipment		□ <u>\$</u>			<u>\$</u>
Construction or leasing of plant building	ngs and facilities	,	□ <u>\$</u>			<u>\$</u>
Acquisition of other business (includin offering that may be used in exchange	for the assets or securities of another					
issuer pursuant to a merger)		•••••••••••	□ <u>\$</u>			<u>\$</u>
Repayment of indebtedness	·		□ <u>\$</u>			<u>\$</u>
Working capital		•••••••	□ <u>\$</u>			<u>\$</u>
•	<u> </u>	. .	□ <u>\$</u>			<u>\$</u>
		<u> </u>	٠٠	·		
Column Totals Total Payments Listed (column totals a			□ <u>\$</u>	⊠ <u>\$45,125</u>	⊠	\$45 <u>,125</u>
	D. FEDERAL SIGNATI	IRE			in e .	
The issuer has duly caused this notice to be signature constitutes an undertaking by the iss information furnished by the issuer to any non-	gned by the undersigned duly authoriz	ed person. If this	notice in	s filed under Rule upon written requ	505, t est of	he following its staff, the
Issuer (Print or Type) Commonwealth Tower, L.L.C.	Signature			Date March 27	, 200	7
Name of Signer (Print or Type) Paul A. Galiano	Vice President		,			

Vice President

	E. STATE SIGNATURE	SA2866 (1915) 1916 (1916) 1916 (1916) 1916 (1916) 1916 (1916) 1916 (1916) 1916 (1916) 1916 (1916) 1916 (1916)
The issuer has read this notification and kn duly authorized person.	ows the contents to be true and has duly caused this n	notice to be signed on its behalf by the undersigned
Issuer (Print or Type)	Signature	Date
Commonwealth Tower, L.L.C.		W March 27,2007
Name of Signer (Print or Type)		
Paul A. Galiano	Vice President	

APPENDIX

1	,	2	3	, , , , , , , , , , , , , , , , , , ,		5			
	Type of security and aggregate offering price offered in State (Part B Item 1) Type of security and aggregate offering price offering price offered in State (Part C Item 1)				Type of In amount in State (Pa	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E Item 1)			
State	Yes	No.	(1)	Number of Accredited Investors	Amount (2)	Number of Non- Accredited Investors	Amount	Yes	No
AL		110	(1)	THVESTORS	(2)	Investors	Amount	165	140
AK			·						
AZ		· · · · · · · · · · · · · · · · · · ·					•		. ,
AR									,
CA									
CO									
· CT			• .	,					
DE			,	·					
DC									,
FL		X	(1)	12	17				
GA	i .	X	(1)	93	134			,	
HI									
ID						·			
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IN IA									
KS					•				,
KY					,	· · · · · ·		<u> </u>	
LA				·					
ME						· · · · · · · · · · · · · · · · · · ·			
MD		X	(1)	3	4.5				
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MN				· · · · · · · · · · · · · · · · · · ·					
MS									
МО							·		
MT									
NE									
NV									
NH									
NJ						•			
NM		• •				,			
NY	-								

APPENDIX

1	2	<u> </u>	3	3 4					5	
				•						
		٠.	·			•				
	Intend to se accredited in State (Part	vestors in	Type of security and aggregate offering price offered in State (Part C Item 1)	Type of investor and amount purchased in State (Part C Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E Item 1)			
	· · ·			Number of Accredited	Amount	Number of Non- Accredited	Amount	Yes	No .	
State	Yes	No	(1)	Investors	(2)	Investors			•	
NC										
ND										
OH										
OK		X	- (1)	4	6	•				
OR	<u> </u>									
PA		X	(1)	2	3					
RI	·	• •						·		
SC	,	·								
SD										
TN		X	(1)	1	1.5					
TX		X	(1)	3	3					
UT							•			
VT						,		,	ļ	
VA		·X	(1)	5	7.5		,	:		
WA									<u> </u>	
WV							· _		<u> </u>	
WI		<u> </u>								
WY					· .					
PR									<u>'</u>	
FN	l	Į į	•	Į į		,			l l	